

## LAW ENFORCEMENT AND VICTIM SERVICES DIVISION GOVERNOR'S OFFICE OF EMERGENCY SERVICES



3650 SCHRIEVER AVENUE MATHER, CALIFORNIA 95655 (916) 324-9100 FAX: 327-5674

April 7, 2006

To: PROJECT DIRECTORS

Elder Abuse Advocacy and Outreach Program (EA)

RE: Request For Application (RFA) FY 2006/07

The Governor's Office of Emergency Services (OES), Law Enforcement and Victim Services Division, is pleased to announce the release of the Elder Abuse Advocacy and Outreach (EA) Program Request for Application (RFA) for Fiscal Year (FY) 2006/07. Enclosed are instructions and forms for completing the EA RFA.

The grant period begins on October 1, 2006 and ends on September 30, 2007. Please note that continuation funding is contingent upon satisfactory project performance, and subject to the availability of federal Victim of Crime Act (VOCA) funds.

There is approximately \$1,611,720 available for this program in FY 2006/07. Only the sixteen (16) EA projects funded in FY 2005/06 are eligible to apply for continuation funding through this RFA. See the funding table in the RFA for your agency's funding level.

New changes for FY 2006/07 are:

- <u>Victim's of Crime Act (VOCA) Funds</u> VOCA funded projects <u>must</u> utilize volunteers to assist in the provision of direct services to the identified special victim population (page 9).
- Operational Agreements (OAs) Projects must formalize an operational agreement with appropriate local agencies in the county. This agreement must demonstrate a formal system of networking and coordination among the agencies with special working relationships involving crisis intervention, emergency services, resource and referral assistance and direct counseling. A formal signed OA must be maintained on file, however, projects are not required to submit the OAs with this application (page 12).
- The grant award face sheet and project summary documents have been revised.

The Elder Abuse Advocacy and Outreach Program RFA is attached to this e-mail. The RFA will also be posted on the OES website in the near future at: <a href="www.oes.ca.gov">www.oes.ca.gov</a>, OES Divisions and Regions, Law Enforcement and Victim Services Division, RFA Funding Information.

To receive continuation funding, applicants must complete and return the enclosed grant application package to OES by the deadline listed on page 1. Instructions for mailing or hand delivery of the application are included in the RFA.

Should you have any questions regarding this RFA, please contact Bill Swearingen at (916) 324-3217 or via e-mail at Bill.Swearingen@oes.ca.gov.

Sincerely,

MARIAELENA RUBICK, Chief Victim/Witness Section

Attachment

# ELDER ABUSE ADVOCACY AND OUTREACH PROGRAM REQUEST FOR APPLICATION



April 2006

# ELDER ABUSE ADVOCACY AND OUTREACH PROGRAM REQUEST FOR APPLICATION

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## ELDER ABUSE ADVOCACY AND OUTREACH PROGRAM REQUEST FOR APPLICATION

#### PART I – INFORMATION

#### A. <u>INTRODUCTION</u>

This Request for Application (RFA) provides all of the information and forms necessary to prepare an application for the Governor's Office of Emergency Services (OES) grant funds. The terms and conditions described in this RFA supersede all previous RFAs and any conflicting provisions stated in the *Recipient Handbook*. The *Recipient Handbook* provides helpful information for developing the application and can be accessed at the website <a href="www.oes.ca.gov">www.oes.ca.gov</a> by selecting "Plans and Publications, *Recipient Handbook*".

#### **B. CONTACT INFORMATION**

Bill Swearingen, Criminal Justice Specialist

Tel: (916) 324-3217 Fax: (916) 324-8554

Bill.Swearingen@oes.ca.gov

Questions concerning this RFA, the application process, or programmatic issues should be submitted to the above contact person by telephone, fax or e-mail.

#### C. APPLICATION DUE DATE AND SUBMISSION OPTIONS

<u>One original and one copy</u> of the application must be delivered to OES' Law Enforcement and Victim Services Division by the date and time indicated below. Submission options are:

1. Regular mail or overnight mail, postmarked by Thursday, May 18, to:

Governor's Office of Emergency Services Law Enforcement and Victim Services Division 3650 Schriever Avenue Mather, CA 95655

Attn: EA-RFA, Victim/Witness Section

2. Hand delivered by 5:00 pm, on the corresponding date listed above to:

Governor's Office of Emergency Services Law Enforcement and Victim Services Division 3650 Schriever Avenue Mather, CA 95655

Attn: EA-RFA, Victim/Witness Section

#### D. **ELIGIBILITY**

Eligibility is restricted to grantees funded through the 1998/99 Elder Abuse Advocacy and Outreach Program's (EAAOP) Request for Proposals (RFP). To receive funding under this program, applicants must also be designated by their local County Board of Supervisors as the County's Victim/Witness Assistance Center and be either a local unit of government, or a non-profit organization, currently operational and receiving OES grant funding for the Elder Abuse Advocacy and Outreach Program (EAAOP). This will be the <u>final</u> year of the multi-year funding cycle resulting from your successful proposal, submitted during the last EAAOP's RFP process.

#### E. FUNDS

Funding provided by this application is for a twelve (12) month period. There is approximately \$1,611,720 available for the EAAOP program. The funding level for this eighth year for each eligible grantee is provided in the chart below. The source of funds for the EA Program is federal Victims of Crime Act (VOCA) funds. A 20% match, based on the Total Project Cost, is required. The match may be met through cash and/or in-kind contributions. Funds designated as match are restricted to the same uses as VOCA funds. All match specified in the budget will become part of the grant award. The budget pages must clearly reflect those items that are meeting the VOCA match requirement.

#### Federal monies must not be used to meet the match requirement

ELDER ABUSE ADVOCACY AND OUTREACH PROGRAM FY 2006/07 Funding Chart							
County	VOCA Funds	VOCA Match	Total Funds				
City of Pasadena	90,000	22,500	112,500				
County of Alameda	140,000	35,000	175,000				
County of El Dorado	90,000	22,500	112,500				
County of Fresno	100,388	25,097	125,485				
County of Los Angeles	180,000	45,000	225,000				
County of Nevada	90,000	22,500	112,500				
County of Sacramento	65,851	16,463	82,314				
County of San Bernardino	140,000	35,000	175,000				
County of San Diego	140,000	35,000	175,000				
County of San Joaquin	110,000	27,500	137,500				
County of San Luis Obispo	105,000	26,250	131,250				
County of Santa Barbara	63,680	15,920	79,600				
County of Stanislaus	86,533	21,633	108,166				
County of Tulare	64,000	16,000	80,000				
County of Ventura	110,000	27,500	137,500				
County of Yuba	36,268	9,067	45,335				

#### F. PROGRAM INFORMATION

The primary goal of the Elder Abuse Advocacy and Outreach Program (EA) is to enhance the safety of elder and dependent adults in California by establishing funded victim advocacy

positions under the administrative authority of a criminal justice agency (i.e., police or sheriff's departments, district attorneys offices, or probation departments) to provide services to elder victims of crime, coordinate direct services in an enhanced response to allegations of elder abuse among locally involved agencies and implement an outreach awareness program for reporters of elder abuse and criminal justice personnel, senior citizens and the public.

The following is a listing of services and activities allowable under the EA Program with VOCA victim assistance grant funds:

- 1. Services which immediately respond to the emotional and physical needs (excluding medical care) of crime victims such as crisis intervention; accompaniment to hospitals for medical examinations; hotline counseling; emergency food, clothing, transportation, and shelter; emergency legal assistance such as filing restraining orders; and other emergency services that are intended to restore the victim's sense of dignity, and self-esteem.
- 2. Services and activities that assist the primary and secondary victims of crime in understanding the dynamics of victimization and in stabilizing their lives after a victimization such as counseling, group treatment, and therapy. "Therapy" refers to intensive professional psychological and/or psychiatric treatment for individuals, couples and family members to provide emotional support in crises arising from the occurrence of crime. This includes the evaluation of mental health needs, as well as the actual delivery of psychotherapy.
- 3. Services that are directed to the needs of the victims who cooperate in the criminal justice system. These services may include advocacy on behalf of crime victims; accompaniment to criminal justice offices and court; transportation to court; child care to enable a victim to attend court; notification of victims regarding trial dates, case disposition information, and parole consideration procedures; and restitution advocacy and assistance with victim impact statements.
- 4. Additional activities that are necessary and essential to providing direct services such as transportation costs for victims to receive services, emergency transportation costs that enable a victim to participate in the criminal justice system, and local travel expenses for direct service providers.
- 5. Services which assist crime victims with managing practical problems created by the victimization such as acting on behalf of the victim with other service providers, creditors, or employers; assisting the victim in recovery of property retained as evidence; assisting in filing for compensation benefits; and helping to apply for public assistance.
- 6. Supervision of direct service providers. VOCA funds may be used for supervision of direct service providers if such supervision is necessary and essential to providing direct services to crime victims. For example, a coordinator of volunteers or interns is a cost-effective way of serving more crime victims.

#### G. SERVICE STANDARDS

#### **Mandatory Services**

The following services are primary to the maintenance of a comprehensive project and respond to the basic rights and needs of victims. Each component is defined below with a description of the basic service.

#### 1. Crisis Intervention

Intervention is any in-person or telephone contact with a client who, at any time, has been negatively affected or is in emotional crisis as a result of a crime or potential crime. After victimization, when the client is in need of crisis counseling the center shall provide the necessary intervention services and arrange for the provision of needed services by local service agencies, as frequently as needed.

#### 2. Emergency Assistance

Emergency assistance is any immediate financial intervention in response to a client's basic material needs, within the first 24 hours after in-person or telephone contact is made with the victim/witness.

At the initial or subsequent contact and assessment of a client's material needs, projects must provide and/or arrange emergency assistance and appropriate local agency services if needed. Assistance provided directly by the projects is subject to availability of resources.

#### 3. Resource and Referral Assistance

Resource and referral assistance is a non-emergency referral, based on the client's request or advocates assessment, to individual(s) or agencies that may provide goods or services necessary to the client, but not provided by the project.

Projects are also encouraged to initiate contact with all appropriate local agencies and form local committees to meet regularly in coordinating services to victims.

#### 4. Direct Counseling

Direct counseling refers to any in-person or telephone contact with a client who is not in emotional crisis resulting from a crime, for the purpose of providing guidance or emotional support.

Included would be contact with client for emotional support, empathic listening, check on a client(s) progress, etc. Such direct counseling will be at a level that does not require licensed professionals. Project staff will make referrals to other appropriate resources for client(s) having professional counseling needs

#### 5. Victims of Crime Claims

The Victim/Witness Assistance Center will inform and assist clients in preparing applications for compensation. The advocate's role does not include determination of eligibility of a client. Advocates should not discourage a client from filing an application. Projects shall inform clients of the right to file an application; however, projects are not required to represent all clients in the compensation process.

The amount of time an advocate spends assisting a client with the application process will be determined by the project on a case-by-case basis as part of the advocate's role as a case manager.

#### 6. Property Return

Upon request from the client, centers must actively assist in obtaining the return of a client's property held as evidence by the criminal justice system. In cases where property cannot be returned, an explanation will be provided to the client or family member.

#### 7. Orientation to the Criminal Justice System

As needed, centers will provide clients with in-person or telephone information on the location, procedures and functioning of the local criminal justice system. Centers should have printed information available in languages appropriate to local ethnic or language needs.

#### 8. Court Escort/Court Support

Upon the request of the client or as deemed necessary by the center's staff, provide information on the case and/or support during court appearances or interviews with law enforcement and prosecutors. *The client must have physical accompaniment for the "Court Escort" service to be counted.* Clients who are assisted by staff in preparation for court appearances or interviews, but are not accompanied, are being provided "Orientation to the Criminal Justice System," and that service should be counted.

## 9. Presentations and Training for Criminal Justice Agencies and Victim Service Organizations

Projects must maintain a listing of all agencies in their community and all other agencies and organizations likely to be a referral resource for victims. Projects will conduct informational presentations designed to identify and refer victim to services.

#### 10. Public Presentations and Publicity

Projects must promote public awareness of their services that identify and refer crime victims to services, through the use of public media (e.g., newspapers, radio, television) and presentations to victim services organizations and community groups, service organizations and community groups, service clubs, and schools. Projects are encouraged to participate in media/public awareness related events promoting victim services, including the annual Victims' Rights Week.

#### 11. Case Status/Case Disposition

Upon request from the client, centers will advise client of the progress and disposition of their case as it progresses through the criminal justice system.

#### 12. Notification of Family/Friends

Upon request, projects must notify a victim's relatives and friends of the occurrence of a crime and the victim's condition as a result of that crime.

#### 13. Employer Notification/Intervention

Upon request from the client, centers will inform an employer(s) that their employee was a victim/witness to a crime, and/or notify the employer(s) as to the condition of the client as a result of the crime. Upon request from the client, encourage the employer(s) to minimize any loss of pay or other benefits, where the occurrence of the crime has caused, or will cause an employee to lose time from work as a result of participation in the criminal justice system.

#### **Optional Services**

The following services are not required, but may be provided by the project if time and resources are available:

#### 1. Employer Intervention

Any other intervention with the client's employer not provided in the Mandatory Services.

#### 2. Creditor Intervention

Intercede on behalf of clients requesting assistance in informing creditors of their temporary inability to meet current financial obligations due to the aftermath of the crime.

#### 3. Child Care Assistance

The center may assist with arranging for temporary childcare while a client is appearing in court, meeting with prosecution or law enforcement officials or otherwise taking part in criminal justice proceedings. The advocate shall not provide direct childcare.

#### 4. Witness Notification

This service pertains to notification of cancellations or changes in scheduled court appearances for witnesses in <u>project related cases</u>. **NOTE: Services to witnesses other than the crime victim or a secondary victim is prohibited by VOCA.** 

#### 5. Funeral Arrangements

Upon request from the client, assist family members of deceased victim/witness with funeral/burial arrangements.

#### 6. Witness Protection

Arrange for law enforcement protection or relocation to a new residence when a witness' safety is threatened. . NOTE: Services to witnesses other than the crime victim or a secondary victim is prohibited by VOCA.

#### 7. Temporary Restraining Order (TRO) Assistance

Assist client in obtaining temporary restraining orders.

#### 8. Transportation Assistance

Assist with arranging or providing transportation for victims and witnesses. **NOTE: Services** to witnesses other than the crime victim or a secondary victim is prohibited by VOCA.

#### 9. Court Waiting Area

Provide a waiting area for victims and witnesses during court proceedings separate from defendants, defendant's families, and/or friends of defendants. . **NOTE: Services to witnesses other than the crime victim or a secondary victim is prohibited by VOCA.** 

#### H. ADA COMPLIANCE

Applicants must be in compliance with the Americans with Disabilities Act (ADA) of 1990, 42 U.S.C. 12101, et seq, and Title 28 of the Code of Federal Regulations, part 35. The applicant shall operate so that each service is accessible to and usable by individuals with disabilities.

Applicants may comply with the requirements of this section through such means as redesign of equipment, reassignment of services to accessible buildings, assignment of aides to beneficiaries, home visits, delivery of services at alternative accessible sites, alteration of existing facilities and construction of new facilities, use of accessible rolling stock or other conveyances, or any other methods that result in making its services, programs, or activities readily accessible to and usable by individuals with disabilities.

Applicants must ensure that communication with individuals with disabilities is as effective as communication with others without disabilities. This includes the use of telecommunications systems for communications by telephone. Applicants must also ensure that individuals with impaired vision or hearing can obtain information as to the existence and location of accessible services, activities, and facilities, as well as provide appropriate signage. This includes all written materials (i.e. brochures, applications, consents, videos, etc.)

Applicants must ensure that all aspects of employment comply with ADA, including the application process (recruitment, hiring) and employment tasks.

#### I. PREPARING AN APPLICATION

For clarity, the forms in Part III include an Application Cover Sheet. Please complete the Application Cover Sheet and attach it to the front of the application.

The following seven components are required for a complete application:

- Application Cover Sheet;
- Grant Award Face Sheet (Form A301);
- Project Contact Information;
- Certificate of Assurance of Compliance:
- The Project Narrative;
- The Budget Narrative and Project Budget (Forms A303a-c), and
- The Application Appendix.

## ELDER ABUSE ADVOCACY AND OUTREACH PROGRAM REQUEST FOR APPLICATION

#### PART II – INSTRUCTIONS

The instructions in this section correspond to each of the application components, as well as to the forms provided in Part III.

The applicant must use the forms provided or computer-generated forms, and plain  $8\frac{1}{2}$  x 11" white paper for the budget and project narrative sections. If computer-generated forms are used, they must duplicate the OES forms.

Application must be typed with characters no smaller than standard 12-pitch font. **The applicant must double-space all narrative sections of the application.** 

Copies of the application must be assembled separately and individually fastened in the upper left corner. **Do not bind application**.

#### A. PROJECT NARRATIVE

The project narrative is the main body of information describing the problem to be addressed, the plan to address that problem through appropriate and achievable objectives and activities, and the ability of the applicant to implement the plan.

#### 1. Problem Statement (maximum 1 page)

The performance history/problem statement section is a narrative that explains the development of your program and how it has evolved. Describe the resources you have and any growth in services. Explain what is missing today in terms of services and resources. Look at this as a report of your past performance. Describe what is still needed and why. Address the unique problems in your county.

#### 2. Plan and Implementation

Discuss your plan for providing services outside the office environment. This may include outreach, direct services to crime victims, and/or training volunteers to provide direct services.

Give a description of working relationships with other agencies and the content of operational agreements. Include an organizational chart with all positions funded by the project, including supervisors as appropriate.

Describe the activities you will take to establish and maintain the following required service components.

#### Immediate Response

Services which immediately respond to the urgent emotional and/or physical needs of crime victims. These services include crisis intervention counseling; accompaniment to hospitals for

medical examinations; hotline counseling; emergency food, clothing, transportation, and shelter (the project may budget up to 5 percent of the total project cost for victim related emergencies in accordance with the Recipient Handbook (RH)); emergency legal assistance such as filing restraining orders; and other emergency services that are intended to restore the victims sense of dignity, self-esteem, and coping mechanisms.

#### **Dynamics of Victimization**

Services and activities that assist the primary and secondary victims of crime in understanding the dynamics of victimization and in stabilizing their lives include follow-up counseling, group treatment/support, and therapy.

#### Criminal Justice System Support

Services directed to the needs of the victim within the criminal justice system. These services include criminal justice advocacy, accompaniment to law enforcement offices, transportation to court, translation services, child care while in court, trial notification and case disposition information, restitution advocacy, assistance with victim impact statements, and parole notification.

#### Information and Referral Services

Services which assist crime victims with managing practical problems created by the victimization. These information and referral services include assisting in the return of property being retained as evidence; assisting in filing for compensation benefits and various types of financial assistance.

#### **Outreach Services**

Program outreach services that pertain to the printing and distribution of brochures and similar announcements describing the direct services available and how they may be obtained. It may also include similar public notification efforts intended to recruit volunteers. This service component does not include lobbying efforts or the printing and distribution of literature designed to affect public opinion concerning legal or political issues. According to federal requirements, projects are specifically forbidden to lobby or provide financial assistance for these activities.

#### **Volunteers**

VOCA funded projects <u>must</u> utilize volunteers to assist in the provision of direct services to the identified special victim population. A description of how volunteers will be utilized must be provided. Discuss how your agency fulfills the mandatory requirement of VOCA to recruit and use volunteers, including how their time is documented. Applicants must use volunteers unless there is a compelling reason to waive this requirement.

#### **Training**

Services that pertain to the training for those persons (salaried or volunteer staff), who provide direct services to crime victims. This service must be restricted to training programs that improve the skills of service providers in directly meeting the needs of special crime victims. It <u>does not</u> include in-service training to other agencies providing services to special crime victims. The service may include reasonable and necessary travel within the State for staff participation in appropriate training programs.

#### B. PROJECT BUDGET

The purpose of the project budget is to demonstrate how the applicant will implement the proposed plan with the funds available through this program. Project costs must be directly related to the objectives and activities of the project. The budget must cover the entire grant period. In the budget, include **only** those items covered by grant funds, including match funds when applicable. Projects may supplement grant funds with funds from other sources. However, since all approved line items are subject to audit, the applicant should not include in the project budget matching funds (if applicable) in excess of the required match. All budgets are subject to OES modifications and approval.

OES requires the applicant to develop a <u>line item</u> budget that will enable them to meet the intent and requirements of the program, ensure the successful implementation of the project, and be cost-effective. Failure of the applicant to include required items in the budget does not exclude responsibility to comply with those requirements during the implementation of the project. The applicant should refer to the *Recipient Handbook* at <u>www.oes.ca.gov</u>. The applicant can select "Plans and Publications, *Recipient Handbook*" for additional information concerning OES budget policy or to determine if specific proposed expenses are allowable. Contact the person listed on page 1, subsection B of this RFA if you have additional budget questions.

#### 1. Budget Narrative (maximum 1 page)

The applicant is required to submit a narrative with the project budget. The narrative must be typed and placed in the application in front of the budget pages. In the narrative describe:

- How the applicant's proposed budget supports the objectives and activities.
- How funds are allocated to minimize administrative costs and support direct services.
- The duties of project-funded staff, including any qualifications or education level necessary for the job assignment.
- How project-funded staff duties and time commitments support the proposed objectives and activities.
- Proposed staff commitment/percentage of time to other efforts, in addition to this project.
- The necessity for subcontracts and any unusual expenditures.
- Mid-year salary range adjustments.

#### 2. Specific Budget Categories

There is a separate form in the Forms Section (Part III) for each of the following three budget categories:

- Personal Services Salaries/Employee Benefits;
- Operating Expenses; and
- Equipment.

Each budget category requires line item detail that addresses the method of calculation and justification for the expense. Enter the amount of each line item in the right hand column of the Budget Category form. All charges must be clearly documented **and rounded off to the nearest whole dollar**. Enter the total amount of the budget category at the bottom of the form. If additional pages are needed, total only the last page of each budget category.

The bottom of the Equipment Category form contains a format for identifying the project total and fund distribution. This section must be completed and submitted even if there are no line items identified in the equipment category.

#### a. Personal Services – Salaries/Employee Benefits (OES A303a):

#### 1) Salaries

Personal services include all services performed by staff who are directly employed by the applicant and must be identified by position and percentage of salaries. All other persons are to be shown as consultants in the Operating Expenses Category supported by a memorandum of understanding (MOU), contract, or operational agreement (OA), which must be kept on file by the recipient and made available for review during an OES site visit, monitoring visit, or audit. Furthermore, in the case of grants being passed through a recipient to be operated by another agency, the staff from the second agency will be shown in the Operating Expenses Category. In either case, they may be salaried or hourly, full-time or part-time positions. Sick leave, vacation, holidays, overtime, and shift differentials must be budgeted as salaries. If agency personnel have accrued sick leave or vacation time prior to the approval of grant funding, they may not take that time off using project funds.

#### 2) Benefits

Employee benefits must be identified by type and percentage of salaries. The applicant may use fixed percentages of salaries to calculate benefits. Budgeted benefits cannot exceed those already established by the applicant.

Employer contributions or expenses for social security, employee life and health insurance plans, unemployment insurance, and/or pension plans are allowable budget items. Other benefits, such as uniforms or California Bar Association dues, are allowable budget items if negotiated as a part of an employee benefit package.

A line item is required for each different position/classification, but not for each individual employee. If several people will be employed full-time or part-time in the same position/classification, provide the number of full-time equivalents (e.g., three half-time clerical personnel should be itemized as 1½ clerical positions).

#### b. Operating Expenses (OES A303b):

Operating expenses are defined as necessary expenditures exclusive of personnel salaries, benefits and equipment. Such expenses may include specific items directly charged to the project, and in some cases, an indirect cost allowance. The expenses must be grant-related (e.g., to further the program objectives as defined in the grant award), and be encumbered during the grant period.

The following items fall within this category: consultant services such as subcontractors who are not employed by the applicant, travel, office supplies, training materials,

research forms, equipment maintenance, software equipment rental/lease, telephone, postage, printing, facility rental, vehicle maintenance, answering service fees, and other consumable items. Furniture and office equipment with an acquisition cost of less than \$1,000 per unit (including tax, installation, and freight) and/or with a useful life of less than one year fall within this category.

#### c. Equipment (OES A303c):

Equipment is defined as nonexpendable tangible personal property having a useful life of more than one year and an acquisition cost of \$1,000 or more per unit (including tax, installation, and freight).

A line item is required for each different type of equipment, but not for each specific piece of equipment (e.g., three laser jet printers must be one line item, not three).

#### C. <u>APPLICATION APPENDIX</u>

The Application Appendix provides OES with additional information from the applicant to support components of the application. The following must be included:

Operational Agreement Summary Form (Part III) must be completed and included in the Application Appendix. Maintain actual Operational Agreements (OA's) on file at the project (available to OES program staff upon request), but <u>do not submit</u> with this Application. List those agencies, organizations, and individuals with whom the project must have OAs for FY 2006/07 and the years covered by those agreements (one, two or three years). A new OA need <u>not</u> be obtained if the current one covers FY 2006/07. When this is not the case, a new OA for FY 2006/07 (at a minimum) must be obtained. OAs must be on file at the project by the project start date.

OAs must be dated and contain original signatures, titles, and agency names for both parties. This document must demonstrate a formal system of networking and coordination with other agencies and the applicant. At a minimum, each Special Emphasis Victim Assistance program should have operational agreements with local Domestic Violence Centers, Rape Crisis Centers and agencies that provide services for child crime victims. The OA should include each agency's roles and responsibilities and the services/resources they will be providing. Those submitted with the application **must be effective for the proposed grant year**. For the purpose of this RFA, the terms OA and Memorandum of Understanding (MOU) are synonymous.

- Project Summary Form;
- Project Service Area Information;
- Additional Signature Authorization, if applicable;
- Computers and Automated Systems Purchase Justification Guidelines, if applicable:
- Emergency Fund Procedures, if applicable;
- Noncompetitive Bid Justification Contracts for Services Checklist, if applicable; and
- Noncompetitive Bid Justification Contracts for Goods Checklist, if applicable.

# ELDER ABUSE ADVOCACY AND OUTREACH PROGRAM REQUEST FOR APPLICATION

### PART III - FORMS

#### **CHECKLIST AND REQUIRED SEQUENCE**

This checklist is provided to ensure that a complete application is submitted to OES.

APPLICATION COVER SHEET
GRANT AWARD FACE SHEET – Signed by the official authorized to enter into Grant Award Agreement.
PROJECT CONTACT INFORMATION
CERTIFICATE OF ASSURANCE OF COMPLIANCE
PROJECT NARRATIVE Problem Statement Plan and Implementation
PROJECT BUDGET  Budget Narrative Budget Forms – OES A303a, A303b, A303c
APPLICATION APPENDIX
<ul> <li>Operational Agreement Summary Form;</li> <li>Project Summary Form;</li> <li>Project Service Area Information;</li> <li>Additional Signature Authorization;</li> <li>Computers and Automated Systems Purchase Justification Guidelines;</li> <li>Emergency Fund Procedures;</li> <li>Noncompetitive Bid Request – Contracts for Services Checklist; and</li> </ul>

Noncompetitive Bid Request – Contracts for Goods Checklist.



## LAW ENFORCEMENT AND VICTIM SERVICES DIVISION GOVERNOR'S OFFICE OF EMERGENCY SERVICES

Governor's Office of Emergency Services

3650 SCHRIEVER AVENUE MATHER, CA 95655 (916) 324-9100 FAX: 327-5674

#### APPLICATION COVER SHEET

#### **RFA PROCESS**

#### **ELDER ABUSE ADVOCACY AND OUTREACH PROGRAM**

**Deliver to Victim/Witness Section** 

Submitted by:

(Place name, address, and phone number of the applicant here.)

#### **GRANT AWARD FACE SHEET INSTRUCTIONS**

#### 1. Grant Recipient

Enter the complete name of the unit of government applying for funding (e.g., County of Alameda, City of Fresno), also referred to as the "recipient."

#### 2. Implementing Agency Name

Enter the complete name of the agency responsible for the day-to-day operation of the grant (e.g., Sheriff, Police Department).

#### 3. Project Title

Enter the complete title of the project. Do not use acronyms.

#### 4. Grant Period

Enter beginning and ending dates of grant cycle as specified in the RFA, Part I, E.

#### 5A - 10G. Fund Allocations and Total Project Cost

For each fund source used in the program, enter the amount of state or federal funds requested, the amount of cash *and/or* in-kind match contributed and the resulting totals. Block 10G should correspond to the total project cost specified in the budget.

#### 11. Certification Paragraph

Please review the Certification Paragraph.

#### 12. Official Authorized to Sigh for the Applicant/Grant Recipient

Enter the signature, name, title, address, telephone number, and e-mail address of the official authorized to enter into the Grant Award Agreement for the city/county or Community-Based Organization, as stated in block 11 of the Grant Award Face Sheet (OES A301). **Provide an original signature of the authorized official in blue ink**.

## **GRANT AWARD FACE SHEET (OES A301)**

[FOR OES USE ONLY]	OES ID:	
[I OK OLO GOL OKL1]	Award No:	

The Governor's Office of Emergency Services, hereafter designated OES, hereby makes a grant award of funds to the following

	iated Redipierit	,	a for the purpose a	illa dalation se	t forth in this grant	awara.		
2. Implementing	Agency:							
3. Project Title				4. Grant Period		to	to	
Fund Source	A. State	B. Federal	C. Total	D. Cash Match	E. In-Kind Match	F. Total Match	G. Total Project Cos	
5.								
6.								
7.								
8.								
9.								
10. TOTALS			\$				10G.	
12. Official Aut	horized to Sig	ın for Applicant/0	Grant Recipient:					
Name				Title				
Official's Mailing	Address: _			City:		Zip:		
	if different).					zip		
Street Address (	ii dillerent).			City _		Zip: Zip:		
Street Address ( Telephone:		FAX:		City _ Email:		·		
·	(area code)		(area code)	_	:	·		
·				_		·		
Telephone:				Email:		·		

#### PROJECT CONTACT INSTRUCTIONS

- 1. Provide the name, title, address, telephone number, fax number and e-mail address for the **Project Director** for the project.
- 2. Provide the name, title, address, telephone number, fax number and e-mail address for the **Financial Officer** for the project.
- 3. Provide the name, title, address, telephone number, fax number and e-mail address for the **person** having **routine programmatic responsibility** for the project.
- 4. Provide the name, title, address, telephone number, fax number and e-mail address for the **person** having **routine fiscal responsibility** for the project.
- 5. Provide the name, title, address, telephone number, fax number and e-mail address for the <a href="Executive Director"><u>Executive Director</u></a> of a Community Based Organization or the <a href="Chief Executive Officer"><u>Chief Executive Officer</u></a> (e.g. chief of police, superintendent of schools) for the implementing agency.

## **PROJECT CONTACT INFORMATION**

Applicant		Grant Numb	Grant Number				
			[FOR OES USE ONLY]				
named below	. If a section does not	ohone number, and e-mail addres apply to your project, enter "Na so required for package deliver	/A." NOTE: If you use a PO				
1. The Proje	ct Director for the project	ect:					
	Name:	Address:					
			Zip:				
Teleph	one #: (Area Code)	Fax #:	(Area code)				
E-IVIAII AC	luiess						
2. The Finar	ncial Officer for the proj	ect:					
	Name:	Address:					
			Zip:				
Teleph	one #: (Area Code)		(Area Code)				
	, ,						
3. The person	on having <u>routine prog</u>	<b>rammatic responsibility</b> for the բ	project:				
	Name:	Address:					
	Title:	City:	Zip:				
Teleph	one #: (Area Code)	Fax #:	(Area Code)				
4. The <b>perso</b>	on naving <u>routine fisca</u>	I responsibility for the project:					
	Name:	Address:					
	Title:	City:	Zip:				
Telep	hone#:  (Area Code)	Fax #:	(Area Code)				
E-Mail Ad							
5. The <b>Exec</b>	utive Director of a non	orofit organization or the <b>Chief Ex</b> of the implementing agency:					
	Name:	Address:					
			Zip:				
Teleph			(Area Code)				
F 84 11 4	,		(Area Code)				
E-Mail Ac	iaress:						

#### CERTIFICATION OF ASSURANCE OF COMPLIANCE

The applicant must complete a Certification of Assurance of Compliance (OES 656), which includes details regarding Equal Employment Opportunity Program (EEOP), Drug Free Workplace Compliance, California Environmental Quality Act, Lobbying, Debarment and Suspension requirements, and Proof of Authority from City Council/Governing Board. The applicant is required to submit the necessary assurances and documentation before finalization of the Grant Award Agreement. In signing the Grant Award Face Sheet, the applicant formally notifies OES that the applicant will comply with all pertinent requirements.

Resolutions are no longer required as submission documents. OES has incorporated the resolution into the Certification of Assurance of Compliance, Section VI, entitled, "Proof of Authority from City Council/Governing Board." The Applicant is required to obtain written authorization (original signature) from the City Council/Governing board that the official executing the agreement is, in fact, authorized to do so, and will maintain said written authorization on file and readily available upon demand. This requirement does not apply to state agencies.

### **CERTIFICATION OF ASSURANCE OF COMPLIANCE**

I, hereby certify that (official authorized to sign grant award; same person as line 12 on Grant Award Face Sheet)
RECIPIENT:
IMPLEMENTING AGENCY:
PROJECT TITLE:
is responsible for reviewing the <i>Recipient Handbook</i> <sup>1</sup> and adhering to all of the Grant Award Agreement requirements (state and/or federal) as directed by OES including, but not limited to, the following areas:
I. Equal Employment Opportunity – (Recipient Handbook, Section 2151)
It is the public policy of the State of California to promote equal employment opportunity by prohibiting discrimination or harassment in employment because of race, religious creed, color, national origin, ancestry, disability (mental and physical) including HIV and AIDS, medical condition (cancer and genetic characteristics), marital status, sex, sexual orientation, denial of family medical care leave, denial of pregnancy disability leave, or age (over 40). <b>OES-funded projects certify that they will comply with all state and federal requirements regarding equal employment opportunity, nondiscrimination and civil rights.</b>
Please provide the following information:
Affirmative Action Officer:
Title:
Address:
Phone:
Email:
II. Drug-Free Workplace Act of 1990 – (Recipient Handbook, Section 2152)
The State of California requires that every person or organization awarded a grant or contract shall certify it will provide a drug free workplace.
III. California Environmental Quality Act (CEQA) – (Recipient Handbook, Section 2153)
The State of California requires all OES-funded projects to obtain written certification that the project is not impacting the environment negatively.

<sup>&</sup>lt;sup>1</sup>The *Recipient Handbook* can be obtained from <u>www.oes.ca.gov</u> by selecting "Plans and Publications, *Recipient Handbook.*"

#### IV. Lobbying – (Recipient Handbook, Section 2154)

OES grant funds, grant property, or grant funded positions shall not be used for any lobbying activities, including, but not limited to, being paid by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal grant or cooperative agreement.

#### V. Debarment and Suspension – (Recipient Handbook, Section 2155)

(This applies to federally funded grants only.)

OES-funded projects must certify that it and its principals are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of federal benefits by a state or federal court, or voluntarily excluded from covered transactions by any federal department of agency.

#### VI. Proof of Authority from City Council/Governing Board

The above-named organization (applicant) accepts responsibility for and will comply with the requirement to obtain written authorization from the city council/governing board in support of this program. The applicant agrees to provide all matching funds required for said project (including any amendment thereof) under the Program and the funding terms and conditions of OES, and that any cash match will be appropriated as required. It is agreed that any liability arising out of the performance of this Grant Award Agreement, including civil court actions for damages, shall be the responsibility of the grant recipient and the authorizing agency. The State of California and OES disclaim responsibility of any such liability. Furthermore, it is also agreed that grant funds received from OES shall not be used to supplant expenditures controlled by the city council/governing board.

The applicant is required to obtain written authorization from the city council/governing board that the official executing this agreement is, in fact, authorized to do so. The applicant is also required to maintain said written authorization on file and readily available upon demand.

All appropriate documentation must be maintained on file by the project and available for OES or public scrutiny upon request. Failure to comply with these requirements may result in suspension of payments under the grant or termination of the grant or both and the recipient may be ineligible for award of any future grants if OES determines that any of the following has occurred: (1) the recipient has made false certification, or (2) violates the certification by failing to carry out the requirements as noted above.

CERTIFICATION
I, the official named below, am the same individual authorized to sign the Grant Award Agreement [line 12 on Grant Award Face Sheet], and hereby swear that I am duly authorized legally to bind the contractor or grant recipient to the above described certification. I am fully aware that this certification, executed on the date and in the county below, is made under penalty of perjury under the laws of the State of California.
Authorized Official's Signature:
Authorized Official's Typed Name:
Authorized Official's Title:
Date Executed:
Federal ID Number:
Executed in the City/County of:
AUTHORIZED BY: (Not Applicable to State Agencies)  City/County Financial Officer, or City Manager, or Governing Board Chair
Signature:
Typed Name:
Title:

# PROJECT NARRATIVE GOES HERE

No standard forms are provided for the Project Narrative.

See Instructions in Part II of this RFA for details.

# PROJECT BUDGET BUDGET NARRATIVE

No standard forms are provided for the Budget Narrative.

See Instructions in Part II of this RFA for details.

BUDGET CATEGORY AND LINE DETAIL  A. Personal Services – Salaries/Employ		VOCA	VOO MAT	СН	TOTAL
A. Personal Services – Salaries/Employ	yee Benefits		Cash	In-Kind	
TOTAL					

BUDGET CATEGORY AND LIN DETAIL	E ITEM	VOCA	VO( MAT		TOTAL
B. Operating Expenses		l l	Cash	In-Kind	
TOTAL					

BUDGET CATEGORY AND LINE ITEM DETAIL		VOCA	VOCA MATCH		TOTAL
C. Equipment			Cash	In-Kind	
CATEGORY TOTAL					
PROJECT TOTAL					
FEDE FUND DISTRIBUTION		ERAL	CASH MATCH	IN-KI	ND MATCH
<ol> <li>Amount of Funds</li> <li>Percentage of Funds</li> </ol>					

# APPLICATION APPENDIX GOES HERE

See Instructions in Part II of this RFA for details.

## **OPERATIONAL AGREEMENT SUMMARY FORM**

(Maximum 3 year Operational Agreements)

Agency	From (date)	To (date)	Number of Years for which this Agreement is effective	Total Years of Agreements between Agency and Organization
Example:				
Anytown Police Department	7/1/05	6/30/06	3 years	12 years

	PROJECT SUMMARY	
	APPLICANT Name: Phone: ( )	
	Name: Phone: ( ) Address: Fax #: ( )	
	City: Zip:	
2.	PROGRAM DESCRIPTION	
3.	PROBLEM STATEMENT	
4.	OBJECTIVES	
5.	ACTIVITIES	

#### PROJECT SUMMARY INSTRUCTIONS

All of the necessary project information must be placed on the form in the space allowed. Additional pages may not be added. This is a **summary** of the project narrative.

- 1. **APPLICANT:** Enter the name and complete address of the organization that is applying for the grant.
- **2. PROGRAM DESCRIPTION:** Provide a description of the specific area of service which OES is authorized to fund based upon state or federal legislation.
- **3. PROBLEM STATEMENT:** Describe the problem the project will address. Support the problem with data such as number of offenses, description of the target area, and local needs.
- **4. OBJECTIVES:** Include the quantifiable measurements which define a course of action in order to accomplish the program goals.
- **5. ACTIVITIES:** Describe activities you will perform to accomplish each objective (quantify where possible).

## PROJECT SERVICE AREA INFORMATION

1.	<u>COUNTY OR COUNTIES SERVED</u> : Enter the name(s) of the county or counties served by the project. Put an asterisk where the project's principal office is located.
2.	<u>U.S. CONGRESSIONAL DISTRICT(S)</u> : Enter the number(s) of the U.S. Congressional District(s) which the project serves. Put an asterisk for the district where the project's principal office is located.
3.	STATE ASSEMBLY DISTRICT(S): Enter the number(s) of the State Assembly District(s) which the project serves. Put an asterisk for the district where the project's principal office is located.
4.	STATE SENATE DISTRICT(S): Enter the number(s) of the State Senate District(s) that the project serves. Put an asterisk for the district where the project's principal office is located.
5.	POPULATION OF SERVICE AREA: Enter the total population of the area served by the proje

## ADDITIONAL SIGNATURE AUTHORIZATION INSTRUCTIONS

The applicant may request signature authority in addition to the designated Project Director and/or Financial Officer by completing an Additional Signature Authority form and submitting it with the Grant Award Forms package. Space is provided for the addition of up to five additional authorizations for the Project Director or Financial Officer.

No single individual may be authorized to sign for both the Project Director and the Financial Officer. By signing the bottom of this form, the Project Director and/or Financial Officer authorize the person(s) identified on the form to act on their behalf on all grant-related matters.

## **ADDITIONAL SIGNATURE AUTHORIZATION**

	Grant Award #:
Applicant:	
Project Title:	
Grant Period: to _	
The following persons are authorized to sign	n for:
Project Director	Financial Officer
Signature	Signature
Name	Name
Signature	Signature
Name	Name
Signature	Signature
Name	Name
Signature	Signature
Name	Name
Signature	Signature
Name	Name
Approved By:	
Project Director:	
Financial Officer:	

## COMPUTER AND AUTOMATED SYSTEMS PURCHASE JUSTIFICATION GUIDELINES

As stated in the 2004 Recipient Handbook, approval for purchases of computers and automated equipment is contingent on the project's ability to demonstrate cost effective, project-related need. This is best demonstrated by clearly relating each computer system or component to the grant objectives and activities.

- A. Please answer the following questions. Attach as many pages as necessary to fully answer each question.
  - 1. What is your agency's purpose for the proposed system? Include a description of the items to be purchased and how they will be used. Also, explain how the proposed equipment and/or software will enhance the project's ability to achieve the objectives/activities of the project as specified in the Grant Award Agreement.
- B. If the request is for hardware and software in which the total costs exceed \$10,000, answer the following questions:
  - 1. Describe the proposed design of your system and indicate whether this is a new system or an addition/enhancement of an existing one. In your description please be specific as to type and location of hardware/software and how the system will be operated and maintained.
  - 2. Will the proposed system design meet not only your current, but future needs? Describe in detail.
  - 3. Does the proposed system integrate with others within the agency? Explain both yes and no responses in detail.
  - 4. Do you plan on integrating this system with existing city, county, regional or statewide networks? Explain both yes or no responses in detail.
  - For criminal justice agencies, does the proposed system meet the minimum requirements of the Statewide Integrated Narcotics System (SINS)? Contact OES for additional information regarding SINS requirements.
  - 6. Does the proposed system include intelligence data subject to 28 CFR Part 23 (2003)? Contact California Department of Justice at (916) 263-1182, Western States Information Network regarding these requirements and have them sign the certification of compliance.

## **EMERGENCY FUND PROCEDURES**

	RECIPIENT NAME	GRANT NUMBER
maintain victim's	er for a project to develop an emergency fund with gined. "Emergency" is defined as any immediate fines basic needs such as: temporary emergency shelted care including prescription medicine, eyeglasses, or	ancial intervention in response to a er, food, transportation, clothing, and
howeve	se of the nature of the fund, it needs to be easily er, that some safeguards and accountability of the ement and audit purposes, the following procedures m	fund be maintained. For effective
1.	The emergency fund and regular grant allocation mown accounts.	ust be kept separate, each with their
2.	Vouchers, receipts, and canceled checks must be n	naintained for audit purposes.
3.	The authority to make payments from the emetaxecutive of the agency. Authority to draw on the empty the Chief Executive to	emergency fund has been delegated
4.	If an imprest cash fund is used, the name, address maintained, as well as the date, amount and reason	
5.	Grant funds will not be commingled with other emer	gency monies.
6.	As checks are drawn against the fund, a copy will b project's accounting.	e sent to the person in charge of the
7.	This fund will be used only in the absence of anoth the case of an emergency.	ner community resource, and only in
8.	Verification of the crime will be made with local law report or verification slip will be kept on file.	w enforcement. A copy of the crime
9.	Payments will be limited to payment for goods or cash payment, will be explored with local merchal limited to no more than \$ per individent on the emergency fund for more than	unts. Direct cash allotments will be dual. Victims are not eligible to draw
10.	<ol> <li>Records will reflect whether the emergency mone partial repayment is expected, or whether the repayments will be considered project income ar emergency fund.</li> </ol>	money is an outright gift. Any

# NONCOMPETITIVE BID REQUEST CONTRACTS FOR SERVICES CHECKLIST

Has the applicant/recipient met the following requirements of the *Recipient Handbook*:

<u>Section 3511</u>	<u>Yes</u>	<u>No</u>
Do conditions exist that require a sole/single-source contract?		
<u>Section 3521.1</u>		
Is a brief description of the program or project included?		
<u>Section 3521.2</u>		
Was it necessary to contract noncompetitively?		
Did the contractor submit his/her qualifications?		
Is the reasonableness of the cost justified?		
Were cost comparisons made with differences noted for similar services?		
Is a justification provided regarding the need for contract?		
<u>Section 3521.3</u>		
Is an explanation provided for the uniqueness of the contract?		
<u>Section 3521.4</u>		
Are there time constraints impacting the project?		
Were comparisons made to identify the time required for another		

# NONCOMPETITIVE BID REQUEST CONTRACTS FOR GOODS CHECKLIST

Has the applicant/recipient met the following requirements of the Recipient Handbook:

Section 3510	<u>Yes</u>	<u>No</u>
Do conditions exist that require a sole/single-source contract?		
<u>Section 3521.1</u>		
Is a brief description of the program or project included?		
<u>Section 3521.2</u>		
Was it necessary to contract noncompetitively?		
Did the contractor submit his/her qualifications?		
Is the reasonableness of the cost justified?		
Were cost comparisons made with differences noted for similar services?		
Is a justification provided regarding the need for contract?		
<u>Section 3521.3</u>		
Is an explanation provided for the uniqueness of the contract?		
<u>Section 3521.4</u>		
Are there time constraints impacting the project?		
Were comparisons made to identify the time required for another contractor to reach the same level of competence?	П	